



# INTEGRATED PROVIDER NETWORK

## SERVICE DESCRIPTION LIST (Medicaid Services)

Service			Set IPN	Avg IPN	Billing Unit
Name / ID			Rate	Rate	
5121 H0005	AODA Group Counseling Alcohol and/or drug svcs; grp couns.	AODA Group counseling provided in a Community Substance Abuse Services Clinic (CSAS) or a certified Outpatient Mental Health Clinic under HFS 75 guidelines. A description of the group identifying the target population, objective of the group, and days/times the group meets must be included in the application to provide this service.	8.00		Quarter Hour
<p><i>Credentials:</i> AODA outpatient clinic license and:</p> <ul style="list-style-type: none"> <li>-Substance Abuse Counselor Certification or above</li> <li>-Substance Abuse Counselor-In-Training certification with clinical supervisor authorization to provide counseling after one of the following requirements has been met: <ul style="list-style-type: none"> <li>-The substance abuse counselor-in-training has completed 1000 hours of supervised training or supervised work experience in the core functions verified by the agency Clinical Supervisor</li> <li>-If an RADC I (credentialed by the WCB) converted to the substance abuse counselor-in-training, the credential holder may practice substance use disorder counseling after providing proof to their clinical supervisor that within the previous 5 years they have completed 100 hours of specialized education by March 1, 2007 in any combination of the performance domains listed in s. RL 166.03.</li> </ul> </li> </ul> <p>All providers of service must have a National Provider Identifier (NPI).</p>					
5101 H0022	AODA Individual/Family Counseling Alcohol and/or drug intervention svc	Individual/family counseling related to AODA issues provided in a licensed Community Substance Abuse Services Clinic (CSAS) or Outpatient Mental Health Clinic under HFS 75 guidelines.	16.00		Quarter Hour
<p><i>Credentials:</i> AODA outpatient clinic license and:</p> <ul style="list-style-type: none"> <li>-Substance Abuse Counselor Certification or above</li> <li>-Substance Abuse Counselor-In-Training certification with clinical supervisor authorization to provide counseling after one of the following requirements has been met: <ul style="list-style-type: none"> <li>-The substance abuse counselor-in-training has completed 1000 hours of supervised training or supervised work experience in the core functions verified by the agency Clinical Supervisor</li> <li>-If an RADC I (credentialed by the WCB) converted to the substance abuse counselor-in-training, the credential holder may practice substance use disorder counseling after providing proof to their clinical supervisor that within the previous 5 years they have completed 100 hours of specialized education by March 1, 2007 in any combination of the performance domains listed in s. RL 166.03.</li> </ul> </li> </ul> <p>All providers of service must have a National Provider Identifier (NPI).</p>					

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5182A T1001	Assessment Svcs-Nursing Nursing assessment/eval	In-home assessment of physical health needs of a child performed by a RN. (A Healthcheck Screening would fall under this category.) Assessment and monitoring of the effects of medication prescribed by a M.D. would also be within this area. Includes In-Home Health Care.)	64.00		Session
<i>Credentials:</i>		R.N. License.All providers of this service must have a National Provider Identifier (NPI).			
5000A 99205,9 9215	Assessments-M.D. Office or other outpatient visit	Psychiatric and/or Medical assessment of a child or adolescent and their family performed by a licensed Psychiatrist (M.D.) and/or other Medical Physician (M.D.) with recommendations for treatment. A psychiatric report of specific findings (with five axis diagnoses) must be submitted to the Care Coordinator within 30 days of the appointment.	200.00		Session
<i>Credentials:</i>		M.D. License in the application process.			
		Effective 1/1/2007, providers of this services must have a National Provider Identifier (NPI).			
5120 H2019	Group Counseling and Therapy Therapeutic Behavioral Services	Goal directed face-to-face psychotherapeutic intervention with the child/family member(s) and/or other caregivers who are treated at the same time in a certified outpatient mental health setting. Focus is on improved peer relationships, communication skills, anger control, improved problem-solving skills, etc. A description of the group identifying the target ppulation, objective of the group, and days/times the group meets must be included in the application to provide this service.	8.00		Quarter Hour
<i>Credentials:</i>		The therapist conducting the group must meet the same requirements as under 5100. An Outpatient mental health clinic license must be presented in the application process. A psychiatrist/psychologist or licensed psychotherapist as defined in 5100 must be part of the practice for consultation and review of cases.			
		Providers of this services must have a National Provider Identifier (NPI).			
5132 H0004	High Risk Counseling and Therapy Behavioral Health Counseling & Therapy	Face-to-face psychotherapy for high risk and/or abuse-specific populations (an individual and/or family/caregiver) requiring skilled and sensitive interventions. Such high risk populations include, but are not limited to, youth with a history of sexual/physical abuse, victimization, eating disorders, sexual orientation and gender identity concerns. Agencies wishing to provide the service must identify the target population at the time of application to provide the service.	18.00		Quarter Hour

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Credentials:	Credentials: Service providers must be licensed and have documented two years (full time equivalent) prior experience working with the target population.				
	Resume of past experience with target population category along with psychotherapist license in one of the following:				
	Clinical Psychologist-Ph.D.				
	Marriage and Family Therapist				
	Professional Counselor				
	Clinical Social Worker				
	Music Therapist				
	Art Therapist				
	Dance Therapist				
	Psychotherapist License must be presented in the application process along with documented history of two years experience in the target population.				
	Providers of this services must have a National Provider Identifier (NPI).				
	Applications are subject to review and approval by the Wraparound High Risk Management staff.				
5163 H2033	Home-Based Behavioral Mgm Lead Multi-systemic therapy for juveniles	This service is designed for children with a dual diagnosis of Developmental Disability and Serious Emotional Disorders, i. e. Autism, who present with behavioral challenges in their home, school and community and are at risk for Residential Care.	70.00		Hour
Credentials:	The required credentials are a Masters level clinician with one year experience working with Developmentally Disabled clients. This clinician will assess needs of youth and family to develop a behavioral treatment plan in coordination with the Plan of Care and IEP and supervise the Behavioral Management Technician. Copies of Masters Degree and documentation of one year of experience working with the Developmentally Disabled population must be submitted prior to approval in the Network.				
5164 H2033	Home-Based Behavioral Mgm-Technician Multi-systemic therapy for juveniles	This service is designed for children with a dual diagnosis of Developmental Disability and Serious Emotional Disorders (i.e. Autism) who present with behavior challenges in their home, school and community and are at risk for Residential Care.	50.00		Hour
	The behavioral management technician will be responsible for training the parent/s or caretaker (and possibly teacher/s at the child's school) on the use of specific behavioral approaches, to model these approaches and provide feedback and support on the application of the techniques (under the direction of the Lead Behavioral Management Staff Member).				
Credentials:	The person providing this service must possess a BS degree in a Human Service field and at least six months experience working with Developmentally Disabled clients. This person must be supervised by the Clinical Lead (as described in Service Code 5163) and will be directly involved with the child and family in implementing the behavioral treatment plan in the home, school and community.				
	Providers of this service must submit copies of a human service degree and verification of 6 months of experience working with the Developmentally Disabled population prior to approval in the Network.				

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5161 H2033	In-Home Case Aide Multi-systemic therapy for juveniles	<p>The In-Home Case Aide is always the second person on a two-person team. A Medicaid reimbursable Lead Therapist (see code 5160) must supervise the Case Aide. (The Case Aide and Lead Therapist must be from the same agency).</p> <p>Medicaid In-Home Treatment is intensive, time limited therapy for a youth with a SED diagnosis (Serious Emotional Disorder) and/or their family/caregiver. Services are provided in the client's home or in rare instances a community-based setting (i.e. when a neutral location is required). Youth served may be at imminent risk of out-of-home placement including a Residential Care Center or a psychiatric hospital, or require this service as an alternative to continued placement in one of those settings. All services provided must be directly related to the client's emotional/ behavioral needs. Appropriate services may deal with family issues related to the promotion of healthy functioning, behavior training and feedback to the family. Services that are primarily social or recreational are not reimbursable. Identified needs, measurable goals and the intensity of treatment should be consistent with the youth/family plan of care. Intensive In-home therapy is generally a "family all" multi-systemic focused service. It is NOT acceptable practice to use this code to provide individual or family counseling/psychotherapy. (See Wraparound In-Home Policy for more information.)</p>	30.00		Hour

*Credentials:*

**CREDENTIALS**

The In-Home Aide must possess one of the following credentials:

(1) An individual with a minimum of a BA/BS Degree in a behavioral health field, a registered nurse, an occupational therapist, a WMAP-certified AODA counselor or professional with equivalent training and at least 1000+ hours of supervised clinical experience working in a program whose primary clients are emotionally and behaviorally disturbed youth/children/families;

or

(2) An individual with minimum of 2000+ hours of supervised clinical experience (without a degree) working in a program whose primary clientele are emotionally and behaviorally disturbed youth/children/families.

**DOCUMENTATION REQUIREMENTS**

Copy of the individual's degree. Proof of experience must be documented in one or more letters of reference supporting the supervised experience or a resume with written corroboration of prior experience by current employer.

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Name / ID			Rate	Rate	
5160	In-Home Lead Medicaid	<p>Medicaid In-Home Treatment is intensive, time limited therapy for a youth with a SED diagnosis (Serious Emotional Disorder) and/or their family/caregiver. Services are provided in the client's home or in rare instances a community-based setting (i.e. when a neutral location is required). Youth served may be at imminent risk of out-of-home placement including a Residential Care Center or a psychiatric hospital, or require this service as an alternative to continued placement in one of those settings. All services provided must be directly related to the client's emotional/ behavioral needs. Appropriate services may deal with family issues related to the promotion of healthy functioning, behavior training and feedback to the family. Services that are primarily social or recreational are not reimbursable (notwithstanding that appropriate clinical interventions such as play therapy may be employed). Intensive In-home therapy is generally a "family all" multi-systemic focused service, although individual or family counseling/psychotherapy sessions are permissible. Identified needs, measurable goals and the intensity of treatment should be consistent with the youth/family plan of care. (See Wraparound In-Home Policy for more information.)</p>	60.00		Hour
H2033	Multi-systemic therapy for juveniles				

Service Name / ID	Set IPN Rate	Avg IPN Rate	Billing Unit
<p><i>Credentials:</i> CREDENTIALS</p> <p>Individuals with the appropriate credentials as outlined below may provide In-Home Lead services for the Wraparound and FISS Programs.</p> <p>Providers of this service must have a National Provider Identifier (NPI).</p> <p>(1) Licensed Professionals Practicing Privately or in a Certified Clinic. These licensed psychotherapists may practice privately (without an affiliation to a Certified Mental Health Clinic).</p> <p>Licensed Clinical Social Worker  Licensed Marriage And Family Therapist  Licensed Professional Counselor, Licensed Music, Art And Dance Therapists  Licensed Psychologist  Psychiatrist.</p> <p>(2) Certified Professionals Practicing Privately (with Supervision)  or in a Certified Clinic  Individuals with certification to provide psychotherapy with supervision as follows:  Advance Practice Social Worker  or  Independent Social Worker</p> <p>Under the supervision of:</p> <ol style="list-style-type: none"> <li>1. An individual licensed as a clinical social worker with a doctorate degree in social work.</li> <li>2. An individual licensed as a clinical social worker with the equivalent of 5 years of full-time clinical social work experience.</li> <li>3. A psychiatrist or a psychologist licensed under ch. 455 of the Wisconsin State Statutes.</li> <li>4. An individual, other than an individual specified in 1,2, or 3 above, who is approved by the social work section of the examining board.</li> </ol> <p>Certified Professional Counselor in Training with supervision as approved by the State of Wisconsin Department of Regulation and Licensing.</p> <p>(3) Other Qualified Professionals in a Certified Outpatient Psychotherapy Clinic  Psychotherapy services may also be provided by other qualified professional staff in a Certified Outpatient Psychotherapy Clinic.  Other qualified professional staff are clinicians with a master's degree and course work in areas directly related to providing mental health services including: social work, clinical psychology, psychology, school psychology, counseling and guidance, counseling psychology or a registered nurse with a masters degree in psychiatric mental health nursing or community mental health nursing and 3,000 hours of supervised experience in a clinical practice.(See below for specific documentation requirements.)</p> <p>DOCUMENTATION REQUIREMENTS</p> <p>During the application process, agencies/individuals shall submit a copy of one of the following: State of Wisconsin License or Certification as described above.  or  Letter from the Program Certification Unit of the State of Wisconsin Bureau of Quality Assurance verifying attainment of 3,000 clinical hours and status as a psychotherapist to provide services under supervision in a Certified Mental Health Clinic</p>			

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or					
EDS letter verifying a Provider's Billing Status as a Master's Level Psychotherapist in a Certified Mental Health Clinic					
License of supervisory agent and resume, as applicable under (2)					
above.					
Copy of Outpatient Clinic License as needed for master's level clinicians working in an Outpatient Psychotherapy Clinic (if not already on file).					
5100	Individual/Family Therapy-Office Based		16.00		Quarter Hour
H0004	Behavioral health couns	Goal directed, face-to-face psychotherapeutic intervention provided to an individual and/or			
OR	& therapy	family/caregivers. Services may be interactive or insight oriented and are provided in an			
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Service Name / ID	Set IPN Rate	Avg IPN Rate	Billing Unit
<p><i>Credentials:</i> Individuals with the appropriate credentials as outlined below may provide Individual/Family Therapy services for the Wraparound and FISS Programs.</p> <p>Providers of this services must have a NPI Number.</p> <p>(1) Licensed Professionals Practicing Privately or in a Certified Clinic</p> <p>These licensed psychotherapists may practice privately (without an affiliation to a Certified Mental Health Clinic). Licensed Clinical Social Worker; Licensed Marriage and Family Therapist; Licensed Professional Counselor; Licensed Music, Art And Dance Therapists; Licensed Psychologist; Psychiatrist.</p> <p>(2) Certified Professionals Practicing Privately (with Supervision) or in a Certified Clinic Individuals with certification to provide psychotherapy with supervision as follows: Advance Practice Social Worker or Independent Social Worker</p> <p>Under the supervision of:</p> <p>(1) An individual licensed as a clinical social worker with a doctorate degree in social work. (2) An individual licensed as a clinical social worker with the equivalent of 5 years of full-time clinical social work experience. (3) A psychiatrist or a psychologist licensed under ch. 455 of the Wisconsin State Statues. (4) An individual, other than an individual specified in 1,2, or 3 above, who is approved by the social work section of the examining board.</p> <p>Certified Professional Counselor in Training with supervision as approved by the State of Wisconsin Department of Regulation and Licensing.</p> <p>(3) Other Qualified Professionals in a Certified Outpatient Psychotherapy Clinic Psychotherapy services may also be provided by other qualified professional staff in a Certified Outpatient Psychotherapy Clinic. Other qualified professional staff are clinicians with a master's degree and course work in areas directly related to providing mental health services including: social work, clinical psychology, psychology, school psychology, counseling and guidance, counseling psychology or a registered nurse with a masters degree in psychiatric mental health nursing or community mental health nursing and 3,000 hours of supervised experience in a clinical practice.(See below for specific documentation requirements.)</p> <p>DOCUMENTATION REQUIREMENTS During the application process, agencies/individuals shall submit a copy of one of the following: State of Wisconsin License or Certification as described above. or Letter from the Program Certification Unit of the State of Wisconsin Bureau of Quality Assurance verifying attainment of 3,000 clinical hours and status as a psychotherapist to provide services under supervision in a Certified Mental Health Clinic or EDS letter verifying a Provider's Billing Status as a Master's Level Psychotherapist in a Certified Mental Health Clinic</p>			



Service			Set IPN	Avg IPN	Billing Unit
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License of supervisory agent and resume, as applicable under (2) above.					
Copy of Outpatient Clinic License as needed for master's level clinicians working in an Outpatient Psychotherapy Clinic (if not already on file).					
5111A 90804-9 0815	Individual/Family Therapy-Ph.D.-Office Insight oriented or interactive psychotherapy	Goal directed, face-to-face psychotherapeutic intervention provided to an individual and/or family/caregivers. Services may be interactive or insight oriented and are provided by a licensed psychologist with a Ph.D. in an office-based setting.	100.00		Session
<i>Credentials:</i> State of Wisconsin Psychologist License					
DOCUMENTATION REQUIREMENTS					
During the application process, agencies/individuals shall submit a copy of the current State of Wisconsin Psychologist License. Providers of this services must have a National Provider Identifier (NPI).					
5050 90862	Psychiatric Review/Meds Other Psychiatric Procedures - Pharmacologic mgmt	Prescription monitoring and evaluation of medication on an outpatient basis by a licensed Psychiatrist. These sessions are usually brief reviews and medication monitoring (with no more than minimal psychotherapy, generally 15 to 30 minutes).	80.00		Session
Pharmacologic mgmt					
<i>Credentials:</i> M.D. License in the application process.					
Effective 1/1/2007, providers of this services must have a National Provider Identifier (NPI)					
5051 90805,9 0807,90 811,908 13	Psychiatric Review/Meds-with Therapy Medical Evaluation and Medication Management	Prescription monitoring on an outpatient basis by a licensed Psychiatrist, including medical evaluation and medication management services, with interactive, insight-oriented or supportive psychotherapy (generally 30 minutes or more).	150.00		Session
					Weekly
<i>Credentials:</i> M.D. License.					
Providers of this services must have a National Provider Identifier (NPI)					
5180B 90899	Psychological Eval. Extended-Ph.D. Other psychiatric service or procedure	Used in conjunction with 5180A, Evaluation Services, Ph.D. If a psychological evaluation will be of a more extensive nature than is customary, the case manager and provider may request an enhanced rate be paid for the evaluation, but this service must be prior authorized by the IPN. A psychological report on the specific findings must be submitted to the care coordinator within 30 days of the appointment.	1.00		Dollar
<i>Credentials:</i> Wisconsin Psychologist License.					
Effective 1/1/2007, providers of this services must have a National Provider Identifier (NPI)					

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5180A 90801	Psychological Evaluation Services-Ph.D. Psychiatric diagnostic interview exam	Performed by a licensed psychologist. Requires a written report, including a DSM-IV diagnosis addressing all five axis and specific treatment recommendations. A psychological report of specific findings must be submitted to the Care Coordinator within 30 days of the appointment.	350.00		Evaluation
<i>Credentials:</i> Wisconsin Psychologist License.					
Effective 1/1/2007, providers of this services must have a National Provider Identifier (NPI)					
5130 H2017	Special Therapy Psychosocial rehab svcs	Therapies, including art, dance, music occupational therapy, including sensory integration therapy) or Equine Facilitated Experiential Learning (therapeutic horseback riding that promotes psycho-social healing and growth.	16.00		Quarter Hour
<i>Credentials:</i> 1) A Bachelor-degreed therapist with 1,000 hours of work experience and who possesses the required credentials/licenses; for dance, art and music therapy, must be certified, registered, or accredited; For OT, must be licensed in Wisconsin. If certified by the National Board for Certification in OT (NBCOT), attach copies of providers' certifications in the application process. 2) Masters-level licensed psychotherapist in one of above special therapies; or 3) BS/BA Degreed-individual with a minimum of 2,000 hours working with youth/families in which the focus of therapy may include promotion of social and/or work skills, community integration and/or recreational skill development, i.e. Recreation Therapist, Vocational Rehabilitation Therapist, etc. 4) Certified member of the North American Riding for the handicapped Association (NARHA) in connection with Equine Facilitated Experiential Learning. 5)Licensed Occupational Therapy Assistant under supervision of a licensed Occupational Therapist  Documentation of experience and copies of certifications/registrations/accreditations/licenses must be provided, as applicable, in the application process in accordance with the foregoing.					
Providers of this services licensed by the State of Wisconsin and must have a National Provider Identifier (NPI).					
5131 H2017	Special Therapy-Group Psychosocial rehab svcs	Therapies, including art, dance, music occupational therapy (including sensory integration therapy) or Equine Facilitated Experiential Learning (therapeutic horseback riding that promotes psycho-social healing and growth utilizing group process.	8.00		Quarter Hour

Service Name / ID	Set IPN Rate	Avg IPN Rate	Billing Unit
Credentials:	<div>1) A Bachelor-degreed therapist with 1,000 hours of work experience and who possesses the required credentials/licenses; for dance, art and music therapy, must be certified, registered, or accredited; For OT, must be licensed in Wisconsin. If certified by the National Board for Certification in OT (NBCOT), attach copies of providers' certifications in the application process.</div> <div>2) Masters-level licensed psychotherapist in one of above special therapies; or</div> <div>3) BS/BA Degreed-individual with a minimum of 2,000 hours working with youth/families in which the focus of therapy may include promotion of social and/or work skills, community integration and/or recreational skill development, i.e. Recreation Therapist, Vocational Rehabilitation Therapist, etc.</div> <div>4) Certified member of the North American Riding for the handicapped Association (NARHA) in connection with Equine Facilitated Experiential Learning.</div> <div>5)Licensed Occupational Therapy Assistant under supervision of a licensed Occupational Therapist</div> <div>Documentation of experience and copies of certifications/registrations/accreditations/licenses must be provided, as applicable, in the application process in accordance with the foregoing.</div> <div>Providers of this services licensed by the State of Wisconsin must have a National Provider Identifier (NPI).</div>		